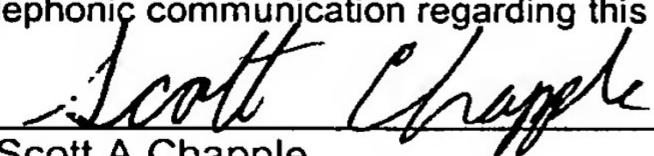


2009/09/23 PTO 03



UTILITY		Attorney Docket No.	62436A (1062-018)	Total Pages	3	
PATENT APPLICATION TRANSMITTAL		First Named Inventor or Application Identifier Kurtycz, Eric R.				
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.	EL991590012US			
Title: SEATING SYSTEM AND METHOD OF FORMING SAME						
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450				
<input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>		6. <input type="checkbox"/> Microfiche Computer Program (Appendix)				
<input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small>		[Total Pages 24]	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ol style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 			
ACCOMPANYING APPLICATION PARTS						
8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))						
9. <input type="checkbox"/> English Translation Document (if applicable)						
10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations						
11. <input type="checkbox"/> Preliminary Amendment						
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>						
13. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>						
14. <input type="checkbox"/> Associate Power of Attorney						
15. <input type="checkbox"/> Sealed envelope containing confidential information, which Applicants may request to be expunged from the application file.						
16. <input checked="" type="checkbox"/> Authorization for payment of fees and Petition for Extensions of Time.						
17. <input checked="" type="checkbox"/> Other: <u>Application Data Sheet</u>						
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Amend the specification by inserting before the first line, the sentence: "This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____. <input checked="" type="checkbox"/> Provisional -This application claims the benefit of U.S. Provisional application No. 60/414,040, filed September 27, 2002.						
19. CORRESPONDENCE ADDRESS						
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		25215		or <input checked="" type="checkbox"/> Correspondence address below		
NAME		Scott A. Chapple				
ADDRESS		401 South Old Woodward Avenue Suite 311				
CITY		Birmingham	STATE	MI	ZIP CODE	
Please direct any telephonic communication regarding this application to the undersigned Attorney/Agent for Applicants:						
 9-23-03 Scott A Chapple Reg. No.: 46,287 Phone No.: (248) 593-9900 Fax No.: (248) 593-0581						

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney's Case No.: 62436A(1062-018)

Application of: Eric R. Kurtycz; Vikas Gupta; Charles W. Bowser; Laxman P. Katakkar

For: SEATING SYSTEM AND METHOD OF FORMING SAME

No. of Drawing Sheets: 5 (Figs. 1-5)

EXPRESS MAIL MAILING LABEL NO. EL991590012US
DATE OF DEPOSIT: September 23, 2003

Sir:

Enclosed for filing is the above-identified application. Please charge the estimated fee to our Deposit Account No. 04-1512. An original and 2 copies of this sheet are enclosed.

A. Basic Filing Fee	<u>\$750.00</u>
Total Number of Claims	<u>21</u>
Less (Basic Fee)	<u>20</u>
B. Extra Claims	<u>1 x \$ 18.00 = \$18.00</u>
Total Number Independent Claims	<u>3</u>
Less (Basic Fee)	<u>3</u>
C. Extra Independent Claims	<u>0 x \$ 84.00 = \$0.00</u>
D. Multiple Dependent Claims Presented	<u>+ \$280.00 = \$_____</u>
TOTAL FILING FEE (A+B+C+D) = <u>\$768.00</u>	

If this estimate is incorrect, please charge or credit our account accordingly.

Respectfully submitted,



Scott A. Chapple
Registration No.: 46,287
Phone: (248) 593-9900

DOBRUSIN & THENNISCH PC
401 South Old Woodward Avenue
Suite 311
Birmingham, MI 48009

Date: 9-23-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant (s): Eric R. Kurtycz; Vikas Gupta; Charles W. Bowser; Laxman P. Katakkar

Attorney Docket No.: 62436A(1062-018) Group Art Unit: Unknown

Filed: Concurrently Herewith

Examiner: Unknown

For: SEATING SYSTEM AND METHOD OF FORMING SAME

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DATE OF DEPOSIT: September 23, 2003

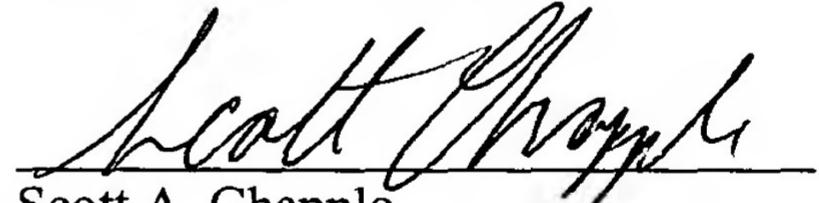
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AUTHORIZATION FOR PAYMENT OF FEES
AND PETITIONS FOR EXTENSIONS OF TIME

Pursuant to 37 CFR 1.136(a)(3), please treat any concurrent or future reply in this application which requires a petition for an extension of time under 37 CFR 1.136(a)(1) as incorporating a petition for an extension of time for the appropriate length of time. Please charge any fees required under 37 CFR 1.17 in this application to Deposit Account No. 04-1512.

Respectfully submitted,



Scott A. Chapple
Registration No.: 46,287
Phone: (248) 593-9900

Date: 9-23-03

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